lame (p	Box 4418	ce (if applicable)			istrict (if applicable)
Aailing A	Address (include city and zip code)	89450		Telephone No. 8	33-1768
-Mail A				AUDDOCIT CODD	
Select A	Appropriate Box(es) CANDIDATE PAC	POL PRTY [☐ IND EXP ☐ N	ONPROFIT CORP	
	☐ LEGAL DEFENSE FUN	ND AMENDED	LOCAL BAG		
	Annual Filing - Due January 15, 2010				10.0
_	Period: January 1, 2009 – December 31, 2009			Cert	May
	Report #1 — Due June 1, 2010* Period: Jan. 1, 2010 — May 27, 2010			FIL	-ED
	Report #2 Due — October 26, 2010*			DEC	2 7 2010
_	Period: May 28, 2010 — Oct. 21, 2010			V.	Rut -
A	Report #3 Due — January 15, 2011*/** Period: Oct. 22, 2010 — Dec. 31, 2010			SECRETA	RY OF STATE
	Annual Filing - Due January 15, 2011			ELEGIRA	INS DIVISION
	Period: January 1, 2010 - December 31,	, 2010			
**	These Reports are filed by incumbents/ca Third Report suffices for 2011 Annual Fili	ndidates in the 2	010 election cyc	le Nos. 1 and 2	
			iso med report	103. 1 and 2	Cumulative From Beginning
	CONTRIBUTIONS SUMMAR	•		This Period	Report Period #1 through End of This Reporting Period
	Total Monetary Contributions Received in Excess of (See page 1 of instruction sheet)	\$100		0	0
	Total Monetary Contributions in the form of loans g party. (See page 2 of instruction sheet)	uaranteed by a third		0	0
	 Total Monetary Contributions in the form of loans th (See page 2 of instruction sheet) 	at were forgiven		0	0
		This Period	Cumulative From Beginning of		
			Report Period #1 Through End of This Reporting Period		
	4. Total Amount of Monetary Contributions Received		T CHOO	0	0-
	(Add Lines 1 through 3) (See page 2 of instruction she	et)	1	-0	-6
	Total Amount of Written Commitments for Contributions (When commitment is funded, report as contribution (monaton or in kind!)	D	2		
	contribution (monetary or in kind)) (See page 2 of instruction sheet) 6. Total Value of In Kind Contributions Received in		0		
	Excess of \$100 (See page 2 of instruction sheet)	0	1		
		EXPENSES SUI	MMARY		
	7. Total Monetary Expenses Paid in Excess of \$100			D	1-8
	(See page 2 of instruction sheet)		1 6	-0	
	Total Value of In Kind Expenses in Excess of \$100 (See page 3 of instruction sheet)	0	-6		
		AFFIRMATI	ON		
Decla	are Under Penalty of Perjury That the Fore	egoing is True an	d Correct.		
<	> 1	11	1 -	/21/10	
_	I mul The	1806	10 0	12110	

PAGE 1 OF 9

Name (print) To saph w. Kules Office (if applicable) India V. Name District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100

Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	Amount of Each Contribution	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 RD PARTY IF LOAN GUARANTEED BY 3 RD PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR
MA					
	2.0				1

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Report Period 3

Joseph M Kubo Incline Village Constallès affine
Name (print)

Office (if applicable)

District (if applicable)

Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100 Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE COMMITMENT	DATE OF EACH COMMITMENT	AMOUNT OF EACH COMMITMENT
	11	
	MA	

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Revised: Oct-09

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perine Village Constable's office.

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	В
Expenses related to travel	С
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	н
** Goods and services provided in kind for which money would otherwise have been paid	1
Other miscellaneous expenses	J

** NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

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Joseph M. Kobo Name (print)

Tucline Village Constitutes office

Office (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
	1),	
	1994	7	

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IN KIND CONTRIBUTIONS AND EXPENSES REPORT

IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.

In kind contributions and expenses include: paid polling and resulting data, paid direct mail, paid solicitation by telephone, any paid paraphernalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.

The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)

Examples of in kind contributions: (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.

Example of in kind expenses: (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.

PAGE 6 0F 9

Name (print)

Incline Village Constables

Office (if applicable)

District (if applicable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 7 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRI- BUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION/ COMMITMENT	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 ^{AD} PARTY IF LOAN GUARANTEED BY 3 ^{AD} PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN
			7/5 2/5 2/8 2/8 2/8 2/8 2/8 2/8 2/8 2/8 2/8 2/8			
		les les				

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Revised: Oct-09

Name (print)

Tucline VIIIAGE Constable's office

In Kind Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100 Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE IN KIND COMMITMENT	DATE OF EACH IN KIND COMMITMENT	AMOUNT OF EACH IN KIND COMMITMENT
	Va	
	7	

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IN KIND

Expenses in Excess of \$100
Transfer Total Value of All In-Kind Campaign Expenses to Line 11 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE
	10	6	
		4	

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Prescribed by Secretary of State NRS 294A 120, 294A 125, 294A 140, 294A 150, 294A 160 294A 200, 294A 210, 294A 220, 294A 362

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